STATEMENT OF

FORM 1	ORGANIZATION (See instructions)	Office use only
1. NAME OF COMMITTEE (in	(Check if name Example: If full) is changed) over the line	typying, type
American Wir	d Energy Association WindPAC	
ADDRESS (number and	street) 1501 M Street, NW, 10th Floor	
(Check if addres is changed)	1	DC 20005 _
	CITY▲	STATE▲ ZIP CODE ▲
(Check if address is changed)	IL ADDRESS (Please provide only one e-mail address) braum@awea.org	
COMMITTEE'S WEB	PAGE ADDRESS (URL)	
(Check if addres	http://www.awea.org	
 DATE O 7 FEC IDENTIFICA IS THIS STATEM 	2 9 2 0 0 9 TION NUMBER C C002595	72 MENDED (A)
I certify that I have examine the second of	ined this Statement and to the best of my knowledge and belief Treasurer Ms. Bree Raum	it is true, correct and complete
Signature of Treasure	Electronically Filed by Ms. Bree Raum	Date 07 / 29 / 2009
NOTE: Submission of fa	lse, erroneous, or incomplete information may subject the pers	
Office Use Only	Feder:	rther information contact: al Election Commission ee 800-424-9530 (Revised 02/2009)